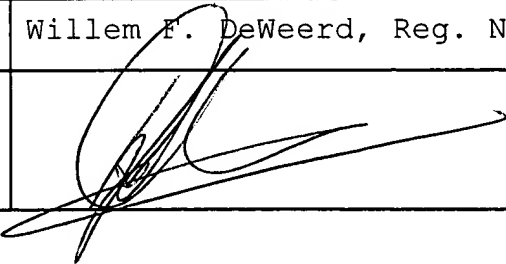


TRANSMITTAL FORM

To be used for all correspondence after initial filing

		Complete if Known	
		Application Number	09/763,914
		Filing Date	May 11, 2001
		First Named Inventor	STAHLER
		Examiner Name	Bennet M. Celsa
		Group Art Unit	1639
		Attorney Docket Number	2923-438
Total Number of Pages in This Submission		Confirmation Number	3624
ENCLOSURES (check all that apply)			

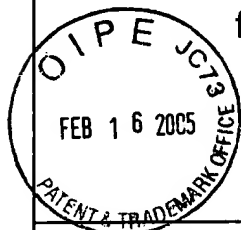
- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input checked="" type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| REMARKS: | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SUBMITTED BY		Complete (if applicable)			
NAME AND REG. NUMBER	Willem F. DeWeerd, Reg. No. 51,613				
SIGNATURE		DATE	February 16, 2005	DEPOSIT ACCOUNT USER ID	

FEE TRANSMITTAL

for FY 2005

(Small Entity)



<input checked="" type="checkbox"/> Applicant claims small entity status		Application Number	09/763,914
Total Amount of Payment		Filing Date	May 11, 2001
(\$) <u>65</u>		First Named Inventor	STAHLER
		Examiner Name	Bennet M. Celsa
		Group Art Unit	1639
		Attorney Docket Number	2923-438
		Confirmation Number	3624

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge the fees indicated below or credit overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Manbeck
- ☒ Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. 02-2135.
2. ☐ Payment by check enclosed.

FEE CALCULATION**1. FILING, SEARCH AND EXAMINATION FEES**

Code	Fee	Fee Description	Fee Paid
1001	150	Utility Filing Fee	[]
	395	filed before Dec. 8, 2004	[]
1111	250	Utility Search Fee	[]
1311	100	Utility Examination Fee	[]
1002	100	Design Filing Fee	[]
	175	filed before Dec. 8, 2004	[]
1112	50	Design Search Fee	[]
1312	65	Design Examination Fee	[]
1003	100	Plant Filing Fee	[]
	275	filed before Dec. 8, 2004	[]
1113	150	Plant Search Fee	[]
1313	80	Plant Examination Fee	[]
1004	150	Reissue Filing Fee	[]
	395	filed before Dec. 8, 2004	[]
1114	250	Reissue Search Filing Fee	[]
1314	300	Reissue Examination Fee	[]
1005	100	Provisional Filing Fee	[]

SUBTOTAL \$**2. CLAIMS**

	Extra Claims	Fee	Fee Paid
Total Claims	[] - 20* = [] x	\$25 = []	[]
Independent Claims	[] - 3* = [] x	100 = []	[]
Multiple Dependent Claims	+	180 = []	[]

*or number previously paid, if greater

SUBTOTAL \$**3. APPLICATION SIZE FEE**

Total Sheets [] - 100 = [] / 50 = []** x \$125 =

** Number of each additional 50 or fraction thereof

SUBTOTAL \$**FEE CALCULATION (continued)****4. ADDITIONAL FEES**

Fee Code	Fee Paid	Fee Description	Fee Paid
1051	65	Surcharge - late filing fee or oath	[]
1052	50	Surcharge - late provisional filing fee or cover sheet	[]
1053	130	Non-English specification	[]
1812	2,520	For filing a request for reexamination	[]
1804	920	Requesting publication of SIR prior to Examiner action	[]
1805	1,840	Requesting publication of SIR after Examiner action (reduced by basic filing fee paid)	[]
1251	60	Extension for reply within first month	[]
1252	225	Extension for reply within second month	[]
1253	510	Extension for reply within third month	[]
1254	795	Extension for reply within fourth month	[]
1255	1,080	Extension for reply within fifth month	[]
1401	250	Notice of Appeal	[]
1402	250	Filing a brief in support of an appeal	[]
1403	500	Request for Oral Hearing	[]
1451	1,510	Petition to institute a public use proceeding	[]
1452	500	Petition to revive -unavoidable	[]
1453	1,500	Petition to revive - unintentional	[]
1807	50	Processing fee under 37 CFR 1.17(q)	[]
1806	180	Submission of Information Disclosure Statement	[]
1809	790	Filing a submission after final rejection (37 CFR 1.129(a))	[]
1810	790	For each additional invention to be examined (37 CFR 1.129(b))	[]
1801	790	Request for Continued Examination (RCE)	[]
1802	900	Request for expedited examination of a design application	[]
1504	300	Publication fee for early, voluntary, or normal publication	[]
1505	300	Publication fee for republication	[]
1455	200	Filing application for patent term adjustment	[]
1456	400	Request for reinstatement of term reduced	[]
1814	130	Statutory Disclaimer	[]
Other fee (specify)			[]

SUBTOTAL \$ 65

SUBMITTED BY		Complete (if applicable)	
NAME AND REG. NUMBER		Willem F. DeWeerd, Reg. No. 51,613	
SIGNATURE	DATE	DEPOSIT ACCOUNT	xxx
	February 16, 2005	USER ID 02-2135	